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# DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☐ Declaration  
Submitted  
With Initial  
Filing

OR

☒ Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number 130-040

First Named Inventor Qin Chen

COMPLETE IF KNOWN

Application Number 10/760,119

Filing Date 01/17/2004

Art Unit 1761

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Compression-Molded Vegetable Wax-Based Candle

(Title of the invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

01/17/2004

as United States Application Number or PCT International

Application Number 10/760,119

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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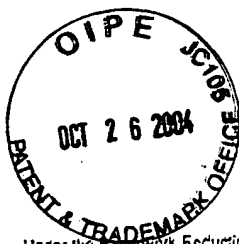
PTO/SB/01 (06-03)

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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input type="checkbox"/> Customer Number: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span> OR <input checked="" type="checkbox"/> Correspondence address below			
Name Ward & Olivo			
Address 382 Springfield Avenue, Suite 300			
City Summit	State NJ	ZIP 07901	
Country US	Telephone (908) 277-3333	Fax (908) 277-6373	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that those statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Qin		Family Name or Surname Chen	
Inventor's Signature <i>Qin Chen</i>		Date 8/29/04	
Residence: City Westerville	State Ohio	Country US	Citizenship US
Mailing Address 8019 Sorrow Drive			
City Westerville	State Ohio	ZIP 43081	Country US
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Bob		Family Name or Surname Volmert	
Inventor's Signature <i>Robert Volmert</i>		Date 9/29/04	
Residence: City New Albany	State Ohio	Country US	Citizenship US
Mailing Address 1217 Retreat Lane			
City New Albany	State Ohio	ZIP 43054	Country US
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/C2A or 02LR attached hereto.			



PTO/E 2/02A (08-03)  
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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Fabien T.		DeSistano	
Inventor's Signature		Date	
Powell	Ohio	US	US
Residence: City	State	Country	Citizenship
10518 Wellington Boulevard			
Mailing Address			
Mailing Address			
Powell	Ohio	43085	US
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Mary Grace P.		David	
Inventor's Signature		Date	
Brampton	Ontario	Canada	Canada
Residence: City	State	Country	Citizenship
18 Foxhollow Road			
Mailing Address			
Mailing Address			
Brampton	Ontario	L7A 3E6	Canada
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
John A.		Ferguson	
Inventor's Signature		Date	
Waverly	Ohio	USA	USA
Residence: City	State	Country	Citizenship
5224 Mist Flower Lane 179 Spring Beauty Drive			
Mailing Address			
Mailing Address			
Waverly	Ohio	45002	USA
City	State	Zip	Country

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